

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**Application / Pack Purpose**

Substitute for Form PTO-875

Application for Dock Number  
101018609

(Column 1) (Column 2)

SMALL ENTITY	
RATE	FEE
X 0	
X 0	
TOTAL	

QR

**OTHER THAN  
SMALL ENTITY**

RATE	FEE
	\$ 890
X 3 _____	0
X 4 _____	0
X 5 _____	0
<b>TOTAL</b>	\$ 890

\* If the difference in column 1 is less than zero, enter "0" in column 2.

Column 1	Column 2	Column 3
----------	----------	----------

ADDITIONAL CHARGES	
RATE	ADDITIONAL FEE
1.00	
2.00	
3.00	
4.00	
5.00	
TOTAL ADDITIONAL FEE	

ca

**OTHER THAN  
SMALL ENTITY**

RATE	ADDITIONAL FEE
7.5% =	0
4.5% =	0
0.5% =	0
TOTAL ADD'L FEE	0

DATE	APPROVAL NAME
10-1-78	
10-1-78	
+1	
TOTAL	
ADDITIONAL COMMENTS	

RATE	ADDITIONAL FEE
1st _____	
2nd _____	
3rd _____	
TOTAL ADD'L FEE	

DATE		ADDITIONAL FEE	
10 9	•		
10 9	•		
10 9	•		

RATE	ADDITIONAL FEE
1.00	
1.00	
1.00	
TOTAL ADDITIONAL FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* The "Highest Number Previously Paid For" IN THIS SPACE is less than \$1, or less "20".

PROFESSOR IN THE DEPARTMENT OF

[illegible][illegible]